Combined Declaration 1	For Pa Ap	pplication an	d Power of Atto	rney		83620N	NEY DOCK AB	ET
As below named invento	or. I hereby declare	that:				1 000_000		
My residence, post office address a			xt to my name,					
I believe I am the original, first ar	nd sole inventor (if	only one name i	is listed below) or an o	riginal, first and jo	int invent	or (if plural	names are	listed
below) of the subject matter which	is claimed and for	which a patent is	sought on the invention	entitled:				
A CLOSED LOOP TI	HREE COLO	OR ALIGN	MENT SYSTE	M FOR A D	IGITA	L PRO	JECTO:	R
The specification of which (check	only one item belov	v):						
X is attached hereto.								ļ
was filed as United States	s Application Seria	al No. on and						
was amended on (if appli								
was filed as PCT internation	ional application N	lumber on and	was amended on (if a	pplicable).				
I hereby state that I have reviewed	and understand the	contents of the al	bove-identified specifica	tion, including the	claims, as	s amended b	y any amend	ment
referred to above.								
I acknowledge the duty to disclose	e to the U.S. Patent	& Trademark Of	fice all information kno	wn to me to be mat	terial to p	atentability a	as defined in	Title
37, Code of Federal Regulations,	§1.56.						_	
I hereby claim foreign priority ber	nefits under Title 3	5, United States (Code, §119 (a)-*d) or 30	65 (b) of any foreig	n applica	tion(s) for p	atent or inve	ntor's
certificate, or (365 (a) of any PCT	international appli	cation(s) which de	esignates at least one co	untry other than the	United S	tates of Am	erica, listed l	below
and have also identified below an	y foreign application	ons(s) for patent of	or inventor's certificate	or any PCT interna	tional app	olication(s)	lesignating a	ı least
one country other than the United	States of America	filed by me on the	e same subject matter ha	ving a filing date b	efore that	of the appli	cation(s) of	which
priority is claimed:				11.0.0.440				
PRIOR FOREIGN/PCT APPLI	CATION(S) AND	ANY PRIORITY	CLAIMS UNDER 35	U.S.C. 119:				
COUNTRY (if PCT, indicate PCT)	APPLI	CATION NUMBER		FFILING dayyear)	P	RIORITY CLAIMED UN	NDER 35 USC §119	
(a + O., macoto + O.)						YES		NO
						YES		NO
	 				-	YES		NO
I hereby claim the benefit under T	va. 25 TT-14-3 C4-4	C-4- 110 8(c)	of any United States n	rovicional annlicatio	n(s) lister	d below:		
)II(B) II5te			
PRIOR PROVISIONAL APPLI	CATION(S) AND	ANY PRIORITY	CLAIMS UNDER 35	U.S.C. §119 (e):				
PROVISIONAL AP	PLICATION NUMBER			FILING DATE (m	onth/day/year)			
	*							
				** · · · · · · · · · · · · · · · · · ·	NTD	(* 1	-4'(-) d	
I hereby claim the benefit under T the United States of America that	Fitle 35, United State	tes Code, §120 of	any prior United States	application(s) or PC	Tinterna s applicat	tional applic	sclosed in th	.gnaun; at/thos
prior applications(s) in the mann	er provided by the	first paragraph of	Title 35, §112, I ackno	wledge the duty to	disclose	to the U.S. I	Patent & 1ra	idemar
Office all information known to	me to be material	to patentability a	is defined in Title 37, (Code of Federal Re	gulations	§1.56, which	ch became a	vailabl
between the filing date of the price	or application(s) and	1 the national or P	CT international filing of	late of this applicat	ion:			
PRIOR US APPLICATIONS O	R PCT INTERNA	TIONAL APPL	ICATIONS DESIGNA	TING THE U.S FO	OR BENE	FIT UNDE	R	
35USC§120:								
	U.S. APPLIC	ATIONS			STA	ATUS (Check o	ne)	
U.S. APPLICATION NUM	BER		J.S. FILING DATE	PATEN*	red	PENDING	ABANDO	ONED
U.S. AFFEIGATION TOWN								
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PC	CT APPLICATIONS DES	SIGNATING THE U.S.			,			
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PCT APPLICATION NO.	PCT FILING	JUAIE	ASSIGNED (if any)					
								
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POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with Eastman Kodak Company Customer No. 01333 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

ı	nd Corresp	ondence to:		Direct Telephone Calls to:	
٠.	14 55.15-F	Patent Legal	Staff	(name and telephone number)	
Eastman Kodak			dak Company	Nelson A. Blish	
		343 State Str	(585) 588-2720		
		Rochester, N	IY 14650-2201	FAX: (585) 477-4646	
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2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
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5	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COU / / / / / / / / / / / / / / / / / / /	
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME		
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
6	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

thereon.		
SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202 13 2 P. AA	SIGNATURE OF INVENTOR 203
12/21/2001	1/02/200Z	01/01/2002
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE